## Allergic Reaction (Mild to Moderate)

#### From HumanResearchWiki

#### **Contents**

- 1 Introduction
- 2 Clinical Priority and Clinical Priority Rationale by Design Reference Mission
- 3 Initial Treatment Steps During Space Flight
- 4 Capabilities Needed for Diagnosis
- 5 Capabilities Needed for Treatment
- 6 Associated Gap Reports
- 7 Other Pertinent Documents
- 8 List of Acronyms
- 9 References
- 10 Last Update

#### Introduction

Mild/moderate allergic reactions are commonly seen both terrestrially and in-flight, and may manifest as distracting skin symptoms (itching, rash), upper respiratory symptoms (nasal congestion, sneezing, coughing, wheezing), or gastrointestinal (GI) symptoms (nausea, diarrhea). Potential allergens that a crewmember may be exposed to during space flight include foods, medications, molds, and chemicals from off-gassing of vehicle components, leakage of chemicals that are part of vehicle systems, and leakage of chemicals used in scientific experiments. The immune dysregulation known to occur during spaceflight may increase the risk of an allergic reaction. [3]

# Clinical Priority and Clinical Priority Rationale by Design Reference Mission

One of the inherent properties of space flight is a limitation in available mass, power, and volume within the space craft. These limitations mandate prioritization of what medical equipment and consumables are manifested for the flight, and which medical conditions would be addressed. Therefore, clinical priorities have been assigned to describe which medical conditions will be allocated resources for diagnosis and treatment. "Shall" conditions are those for which diagnostic and treatment capability must be provided, due to a high likelihood of their occurrence and severe consequence if the condition were to occur and no treatment was available. "Should" conditions are those for which diagnostic and treatment capability should be provided if mass/power/volume limitations allow. Conditions were designated as "Not Addressed" if no specific diagnostic and/or treatment capability are expected to be manifested, either due to a very low likelihood of occurrence or other limitations (for example, in medical training, hardware, or consumables) that would preclude treatment. Design Reference Missions (DRMs) are proposed future missions designated by a set of assumptions that encompass parameters such as destination, length of mission, number of crewmembers, number of Extravehicular Activities (EVAs), and anticipated level of

care. The clinical priorities for all medical conditions on the Exploration Medical Condition List (EMCL) can be found here (https://humanresearchwiki.jsc.nasa.gov/index.php?title=Category:All\_DRM). The EMCL document may be accessed here (https://humanresearchwiki.jsc.nasa.gov/images/6/62/EMCL\_RevC 2013.pdf).

Design Reference Mission	Clinical Priority	Clinical Priority Rationale
Lunar sortie mission  Assumptions:  4 crewmembers (3 males, 1 female)  14 days total  4 EVAs/ crewmember  Level of Care 3	Shall	A mild/moderate allergic reaction may manifest as distracting skin symptoms (pruritus, rash), upper respiratory symptoms (coryza, nasal congestion, sneezing, coughing, wheezing), or GI symptoms (nausea, diarrhea), all with the potential to impact the crew's productivity and wellbeing. Without treatment the allergic reaction may escalate to a severe life-threatening allergic reaction. Therefore, treatment capability shall be manifested.
Lunar outpost mission  Assumptions:  4 crewmembers (3 males, 1 female)  180 days total  90 EVAs/ crewmember  Level of Care 4	Shall	A mild/moderate allergic reaction may manifest as distracting skin symptoms (pruritus, rash), upper respiratory symptoms (coryza, nasal congestion, sneezing, coughing, wheezing), or GI symptoms (nausea, diarrhea), all with the potential to impact the crew's productivity and wellbeing. Without treatment the allergic reaction may escalate to a severe life-threatening allergic reaction. Therefore, treatment capability shall be manifested.
Near-Earth Asteroid (NEA) mission  Assumptions:  3 crewmembers (2 males, 1 female) 395 days total 30 EVAs/ crewmember Level of Care 5	Shall	A mild/moderate allergic reaction may manifest as distracting skin symptoms (pruritus, rash), upper respiratory symptoms (coryza, nasal congestion, sneezing, coughing, wheezing), or GI symptoms (nausea, diarrhea), all with the potential to impact the crew's productivity and wellbeing. Without treatment the allergic reaction may escalate to a severe life-threatening allergic reaction. Therefore, treatment capability shall be manifested.

## **Initial Treatment Steps During Space Flight**

A link is provided to a prior version of the International Space Station (ISS) Medical Checklist, which outlines the initial diagnostic and treatment steps recommended during space flight for various conditions which may be encountered onboard the ISS. Further diagnostic and treatment procedures beyond the initial steps outlined in the Medical Checklist are then recommended by the ground-based Flight Surgeon, depending on the clinical scenario. Please note that this version does not represent current diagnostic or treatment capabilities available on the ISS. While more recent versions of this document are not accessible to the general public, the provided version of the checklist can still provide a general sense of how medical conditions are handled in the space flight environment. Medical Checklists will be developed for exploration missions at a later point in time.

Please note this file is over 20 megabytes (MB) in size, and may take a few minutes to fully download.

ISS Medical Checklist (http://www.nasa.gov/centers/johnson/pdf/163533main\_ISS\_Med\_CL.pdf)

## **Capabilities Needed for Diagnosis**

The following is a hypothetical list of capabilities that would be helpful in diagnosis. It does not necessarily represent the current capabilities available onboard current spacecraft or on the <u>ISS</u>, and may include capabilities that are not yet feasible in the space flight environment.

- Vital signs measurement capability (blood pressure, pulse, respiratory rate, pulse oximetry, as required per the patient's clinical state)
- Auscultation device (such as a stethoscope)

## **Capabilities Needed for Treatment**

The following is a hypothetical list of capabilities that would be helpful in treatment. It does not necessarily represent the current capabilities available onboard current spacecraft or on the <u>ISS</u>, and may include capabilities that are not yet feasible in the space flight environment.

- Antihistamine (oral)
- Steroids (oral/topical)
- Decongestant/expectorant (oral)
- Saline nasal spray
- Saline eye drops

#### **Associated Gap Reports**

The <u>NASA</u> Human Research Program (<u>HRP</u>) identifies gaps in knowledge about the health risks associated with human space travel and the ability to mitigate such risks. The overall objective is to identify gaps critical to human space missions and close them through research and development. The gap reports that are applicable to this medical condition are listed below. A link to all of the <u>HRP</u> gaps can be found here (http://humanresearchroadmap.nasa.gov/Gaps/).

- 1.01 We do not know which emerging technologies are suitable for preflight medical screening for exploration missions.
- 2.01 We do not know the quantified health and mission outcomes due to medical events during exploration missions.
- 2.02 We do not know how the inclusion of a physician crew medical officer quantitatively impacts clinical outcomes during exploration missions.
- 3.01 We do not know the optimal training methods for in-flight medical conditions identified on the Exploration Medical Condition List taking into account the crew medical officer's clinical background. (Closed)
- 3.03 We do not know which emerging technologies are suitable for in-flight screening, diagnosis, and treatment during exploration missions.
- 4.01 We do not have the capability to provide a guided medical procedure system that integrates with the medical system during exploration missions.
- 4.14 We do not have the capability to track medical inventory in a manner that integrates securely with the medical system during exploration missions.
- 4.15 Lack of medication usage tracking system that includes automatic time stamping and crew identification
- 4.17 We do not have the capability to package medications to preserve stability and shelf-life during exploration missions.
- 4.19 We do not have the capability to monitor physiological parameters in a minimally invasive manner during exploration missions.
- 4.23 We do not have the capability to auscultate, transmit, and record body sounds during exploration missions.
- 4.24 Lack of knowledge regarding the treatment of conditions on the Space Medicine Exploration Medical Condition List in remote, resource poor environments (Closed)
- 5.01 We do not have the capability to comprehensively manage medical data during exploration missions.

#### **Other Pertinent Documents**

### **List of Acronyms**

D	
DRM	Design Reference Mission
E	
<b>EMCL</b>	<b>Exploration Medical Condition List</b>
EVA	Extravehicular Activity
G	
GI	Gastrointestinal
I	
ISS	International Space Station
M	

MB	Megabyte
N	
NEA	Near Earth Asteroid

#### References

- 1. Medline Plus. Allergic Reactions. Dugdale D, editor. Medline Plus. 4-28-2008. Bethesda, US National Library of Medicine; National Institutes of Health. 6-17-2010.
- 2. Merck Manual. Allergic Disorders. Porter RS, editor. Merck Manuals Online Medical Library. 2011. Whitehouse Station, N.J, Merck Sharp & Dohme Corp. 1108-1124.
- 3. Marshburn TH. Acute Care. In: Barratt M, Pool S, editors. Principles of Clinical Medicine for Space Flight. New York: Springer; 2008. p. 101-22.

## Last Update

This topic was last updated on 8/12/2014 (Version 2).

Retrieved from "https://humanresearchwiki.jsc.nasa.gov/index.php? title=Allergic\_Reaction\_(Mild\_to\_Moderate)&oldid=5623"

Category: Medical Conditions

■ This page was last modified on 12 August 2014, at 14:26.